								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR														
Effective October 1, 2003								10720894						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			14				Γ	RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			(Ψ minus 20=		• 6			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			5 minus 3 =		` 2 '		Ī	X43=		OR	X86=	172		
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT		. 🗆		ľ	+145=		OR	+290=			
* If the difference in column 1 is less than zero,					"0" in c	column-2	L	TOTAL	 	OR	TOTAL	942		
CLAIMS AS AMENDED - PART II									<u> </u>	•	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A	8/210	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 14	Minus	÷ 6	40	=		X\$ 9=		OR	X\$18=			
	Independent	. 5	Minus	*** 2	2_	=		X43=		OR	X86=			
L	FIRST PRESENTATION OF MULTIPLE DE			ENDENI	CLAIM			+145=		OR	+290=	V		
•							L	TOTAL			TOTAL			
	(Column 1) (Column 2) (Column 3)								L	JO., ,	ADDIT. FEE			
_		CLAIMS	<u> </u>	HIGH	EST		Г	•	ADDI-	l f		ADDI-		
AMENDMENT B	1	REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL		
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	1		
	Independent	*	Minus	***		-		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
L								TOTAL		OR .	TOTAL	•		
(Column 1) (Column 2) (Column 3)								DDIT. FEE	•		ADDIT. FEE			
	\ .	(Column 1) CLAIMS	· · ·	HIGHEST					ADDI-			ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL		
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=			
ME	Independent	+	Minus	***	<u> </u>	3		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.45			.000			
• 1	f the entry in colu	L	+145= TOTAL		OR	+290=								
**	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 								·	OR ,	TOTAL ADDIT. FEE			
		mber Previously Paid ber Previously Paid					found	d in the app	oropriate box	in col	ımn 1.			